Central Region Quality Assurance Plan for Child Protective Investigations

FY 2008 – 2009

7/1/2008
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Section I - Background

Department’s Mission Statement
Protect the Vulnerable, Promote Strong and Economically Self-Sufficient Families, and Advance Personal and Family Recovery and Resiliency.

Department’s Vision
We will be recognized as a world class social services system, delivering valued services to our customers. We are committed to providing a level and quality of service we would want for our own families.

Secretary’s Guiding Principles
The Department’s Child Welfare Quality Assurance (QA) Regional Model is based on the guiding principles defined by General Bob Butterworth.

- Integrity
- Leadership
- Transparency
- Accountability
- Community Partnerships
- Orientation to Action

“All staff must understand each person has a role in assuring quality service to children and families. Everyone must be responsible for taking immediate action when there is any evidence the life, safety, or health of a child may be threatened. Whether the evidence is observed in the field, identified through formal review, or heard in an interview or other discussion with knowledgeable case participants or stakeholders, personal integrity and responsibility require action.”

Central Region Quality Assurance

Effective July 1, 2007, QA Specialists that formerly reported to Central Office were to report to the Regional Family Safety Program Administrator. The Central Region Family Safety Program Office consists of 1 Program Manager, 4 Family Safety Specialists, 1 QA Manager, 9 QA Specialists and one Death Review Coordinator.

Section II Child Welfare Quality Assurance Activities

Child Protective Investigation (CPI) Operational Review

Operational reviews occur at the unit level daily and are an on-going responsibility through supervisory review requirements. Unit CPI Supervisors are responsible to review investigative activities during the course of the investigation, at critical milestones and at closure on 100% of their cases. This unit level review also includes second party reviews of investigations meeting certain criteria. Oversight, guidance and follow-up
provided by the CPI Supervisor and second party reviewer provide guidance to ensure that all necessary investigative activities are completed prior to disposition of the investigation and guarantee child safety throughout the course of the investigation. Documentation of this level of review will be completed in the Florida Safe Families Network (FSFN), to capture existing milestones and data elements reviewed.

An additional qualitative review component will be implemented as part of the new Central Region QA Model to occur at the Unit CPI Supervisor level. The “Mentoring and Modeling Quality” Discussion Guide for Child Protective Investigations Supervisors (Appendix A) is to be utilized by CPI Supervisors on a monthly basis. The CPI Supervisor at a minimum will randomly select three investigations per CPI, each calendar month and facilitate discussion of critical and qualitative aspects of the investigative process with the CPI. The discussion guide will be presented to the Circuit Operations Managers and Circuit Administrators for implementation beginning July 2008.

The CPI Supervisor must first review the investigative record in preparing for the qualitative discussion including a review of the following:

- All prior reports to the Hotline and outcomes
- Intake summary and allegations
- Household composition and frequent visitors
- Interview notes of child and family members
- Use of collateral contacts in assessing the family
- Assessment of criminal background checks
- Referrals to Child Protection Team and Law Enforcement as appropriate
- Completeness of Child Safety Assessment
- Consultation with Children’s Legal Services as appropriate
- Referral for behavioral health assessment as needed

The CPI Supervisor will document in an investigation case note in FSFN that the discussion occurred, summarizing any major points that may need further attention and potential trend characteristics to be considered in the future. The CPI Supervisor will provide documentation to the Program Administrator that discussions occurred as outlined in this guide to include the investigation case number. The Program Administrator will maintain an excel spreadsheet that identifies which investigations were reviewed monthly by the CPI Supervisor and CPI. The Program Administrator will forward the excel spreadsheet each month to the Family Safety Program Office QA Manager for tracking and analysis. The Region QA will conduct a random sample review of the investigations that used the discussion guide to evaluate the quality of the discussions occurring between the CPI Supervisor and CPI and to provide technical assistance to further enhance this qualitative discussion process. Findings of the QA review will be provided to the Circuit Administrator.
Regional Discretionary CPI Quality Review

Regional management will conduct circuit level QA on topics or focus areas selected at the region’s discretion. This may include joint reviews by QA staff and CPI Supervisors.

The purpose for any particular review will vary depending on the regional selection of topic, which may include but is not limited to:

- Provide corrective feedback to supervisors about their review process
- Capture data on investigative quality not included in automated data capture
- Opportunity for joint learning about both practice and QA issues and topics
- Assess specific characteristics of staff, units, or types of cases (i.e. high risk factors, geographic area), especially indicated by comprehensive review results.

Regions must conduct at least two reviews per year. Regions will conduct a discretionary review in each circuit at least once per year. The selection should focus on cases where immediate corrective feedback can occur to enhance performance improvement (prior to closure). Region will choose the topic and scope of the review. Region QA will have the discretion to address review topics of the circuits to ensure discretionary reviews are focusing on operational issues, and not necessarily a specific case file review. For instance, a request for a single case review would not constitute a discretionary review; however, findings from that review might result in a more comprehensive review of program performance in the circuit.

During FY 2007 – 08, the Central Region QA completed twenty-one discretionary QA reviews on a variety of focus areas to include:

Voluntary Protective Supervision; re-abuse; some indicator findings; safety plan requirements per CFOP 175-88; validation of CPI and CPI Supervisor; falsification; foster home licensing; institutional investigations; and several individual case file reviews to address CPI or CPI Supervisor knowledge, skills and abilities and individual cases identified by management for more in depth review.

Regional Comprehensive CPI Oversight Review

Region QA will conduct a comprehensive review of a sample of closed investigations on a semi-annual basis to assess the level of qualitative interventions and compliance with Florida Statute and Administrative Code. The purpose is to provide analysis and documentation of oversight and broad assessment of the circuit and region’s performance in responding to child investigations, as well as longer term practice improvement for child protective investigation and supervision and assessment of compliance with rule and statute.
The CPI review tool has been revised for implementation effective July 2008, to focus on qualitative standards, “Quality of Practice Standards for Child Protective Investigations”. (Appendix B)

The annual total review will cover a “90/10” (90% confidence level and a 10% confidence interval) random sample for each circuit. The sample will be split in half and a review will be completed in each circuit semi-annually. The Statewide QA web based system will be used to compile review data, reporting and analysis of the findings. Each investigation reviewed will be captured in the system as an individual report and the data will be aggregated to come up with specific data at the Circuit, Region and State level for reporting and analysis. With the availability of the data in the QA web based system, performance over time and across reviews can be further analyzed and areas for improvement identified. This will allow the region to identify systemic issues occurring within the Region as well as at the individual circuit level and compare statewide performance.

Region QA will select the sample based upon standardized statewide parameters. Region QA will query FSFN for a list of investigations closed within the past 60 days preceding 30 days before the actual on-site review to allow for preparation time and still being able to capture recently closed investigations.

Investigations excluded from the sample include those closed as “No Jurisdiction” or “Duplicate”, as Region FSPO reviews these separately; “Special Conditions”, and institutional investigations. The review sample must be randomly selected and methodology used to identify the sample must be explained in the review report.

Region QA will review all investigations closed with closure reason of No Jurisdiction and Duplicate monthly. This review is currently being done and will continue to ensure the proper use of these closure reasons and compliance with the Central Region policy concerning proper documentation and justification of these closure reasons.

Region QA will conduct an institutional investigation review in each Circuit with the implementation of the statewide institutional review tool. In the event that a statewide tool is not implemented, Region QA will develop and implement a tool in order to initiate a random sample review of institutional investigations.

Upon completion of the semi-annual case file reviews an exit will follow within one (1) week and a written report will be provided to the Circuit within thirty (30) days following the end of the on-site review.

The final review report will include Circuit specific recommendations to address opportunities for improvement identified which may include training needs. Region FSPO Specialists and QA coordinate to create or provide any training identified to the circuit. Region FSPO and QA will participate in any workgroups or action plans resulting from a QA review and work in collaboration with the Circuit and Region to
improve performance. The Region FSPO has a training calendar posted online, as well as a brochure which identifies all training available to the Region.

**Challenge Process**

In February 2008, the Central Region QA implemented a challenge process to occur upon completion of the on-site file review. The purpose of the challenge process is to educate the investigation staff and Region QA as to the QA process and needs of the field; to facilitate communication; and as a result has been received positively by all involved. This has been an excellent learning opportunity for everyone and will continue for all semi-annual Comprehensive CPI reviews.

Region QA provides all completed review tools and a challenge form to the Program Administrator and CPI Supervisor upon completion of the case file review. They are asked to review each tool and document any questions, comments or concerns they identified and return the challenge form to Region QA within seven (7) days. The challenges received are then reviewed by Region QA and discussed with the CPI Supervisor initiating the challenge. If the CPI Supervisor can show in concrete terms any discrepancies to their benefit, the QA team lead will modify the tool and adjust the score accordingly.

**Role of QA Lead Reviewer**

The QA Manager will assign a lead reviewer for all QA reviews assigned to the unit. The QA lead reviewer responsibility will rotate amongst QA Reviewers in the region to ensure equitable work distribution. The decision will be based upon workload and QA review requests received.

The lead QA reviewer is responsible for taking a leadership role during the course of the review as follows:

- Selecting a random sample appropriate to the criteria of the review
- Identify team members to participate in the review
- Provide technical assistance to review applicable laws, rules, policies, procedures and review instrument
- Schedule review activities; organize and assign team member responsibilities; and identify location of review
- Review all completed tools of team members to ensure inter-rater reliability; data integrity, and consistency
- Provide the QA Manager with status updates as to progress throughout the review process
- Compile and analyze the data obtained from all the files reviewed
• Prepare and present a power point presentation to provide preliminary results of the QA review to the Circuit / Region leadership team upon completion of the on-site file review; the presentation is to include: strengths; opportunities for improvement; child safety issues identified, training needs; systemic or programmatic concerns and comparison data from previous reviews
• Analyze data and provide a professionally written report addressing findings from the review to include issues that affect child safety and offer recommendations to address problem areas or issues.
• Complete stakeholder interviews, as appropriate for Semi-Annual CPI Comprehensive QA reviews

Stakeholder Survey
As part of each comprehensive CPI review, the interview of internal and external stakeholders will be conducted. These interviews are done via telephone or in person and documented in the stakeholder survey format that is currently being developed by Central Office FSPO. The results of responses provided from the stakeholders will be compiled into a separate excel spreadsheet and a summary of the findings included in the final Comprehensive Review Report. The report will include overall comments provided by the stakeholders to assist Circuit Administration in identifying areas that may require additional focus to build community partnerships and facilitate communication.

Request for Action
There are two types of Request for Action that may be generated during a review: administrative or child safety. If at any time during a case file review a Region QA reviewer identifies a concern that warrants bringing attention to management due to an administrative or child safety concern, a Request for Action form will be completed immediately upon knowledge of the concern. (Appendix C)

Child Safety Request for Action maybe generated to document any evidence the life, safety, or health of a child may be threatened. If a Request for Action is generated due to child safety issues, the information is immediately (within 4 hours) provided to the Program Administrator responsible for the investigation and a formal written response is requested back from the field staff within 48 hours as to how the issue was resolved by management. This may include providing Region QA with supporting documentation as to how it was addressed. Region QA will review the response and determine if the response was sufficient to address the child safety concern identified. Should for any reason, additional action need to be taken by Region QA it will be addressed on a case by case basis with Operations Manager and then the Circuit Administration to ensure child safety.

Administrative Request for Action may be generated when there are concerns that are not related to child safety. They may include but are not limited to: data integrity issues; FSFN documentation; failure to follow up on medical or mental health needs; or missing documents.
All Requests for Action generated by the Region QA will be tracked in an excel spreadsheet for each semi-annual Comprehensive Review. The spreadsheet will capture specific case information; the request date and requestor; the type of request (administrative or safety); the presenting concern; due date; date response received; and how it was resolved. With this data, Region QA can further analyze the frequency and types of requests being made and how they are resolved providing another level of analysis of issues identified during case file reviews. This data will be included in the final Comprehensive Review Report provided to the Circuit Administrator 30 days from case file completion.

**Real Time CPI Reviews**

The Central Region QA Unit initiated the Real Time reviews in the Region in May of 2008. These reviews will continue for FY 08 – 09 and will be conducted monthly using the July 2008 revised CPI review standards used for semi-annual Comprehensive CPI reviews. Region QA will provide training on the new standards in July 2008.

A Region QA Specialist is assigned to each of the seventeen service centers in the Region to complete these reviews. The QA Specialist is responsible for scheduling these reviews monthly with the Program Administrator and will randomly select one investigation from each unit that was closed the previous week by the supervisor of that unit. Upon completing the individual file review, the QA Specialist will provide one-on-one face-to-face feedback with the CPI Supervisor and review the completed tool. The CPI's presence is requested, but not a requirement. The findings of all reviews done for a particular service center will be presented to the Program Administrator at the conclusion of each monthly review. Results from each monthly review will be compiled in a service center specific spreadsheet and analyzed quarterly to identify trends, training needs, strengths and opportunities for improvement.

Region QA are also ensuring that the needs of CPI and CPI Supervisors are being met by attending monthly service center meetings and providing immediate technical assistance or training at the request of the Program Administrator.

**The Central Region Semi-Annual CPI QA Review Schedule FY 08 - 09**

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“Mentoring and Modeling Quality”

A Discussion Guide for Child Protective Investigations Supervisors

Objective: To improve practice and outcomes for children and families who have been reported for child abuse or neglect.

Underlying Principle: All staff must understand each person has a role in assuring quality service to children and families. Everyone must be responsible for taking immediate action when there is any evidence the life, safety, or health of a child may be threatened. Whether the evidence is observed in the field, identified through formal review, or heard in an interview or other discussion with knowledgeable case participants or stakeholders, personal integrity and responsibility require action.

Sampling Methodology: At a minimum, supervisors must randomly select three cases per child protective investigator, each calendar month and facilitate discussion of critical and qualitative aspects of the investigative process specific to the sampled case with the investigator.

Instructions: The supervisor must first review the investigative record in preparing for a qualitative discussion with the investigator. The file review includes the following:
- All prior reports to the Hotline and outcomes
- Intake summary and allegations
- Household composition and frequent visitors
- Interview notes of child and family members
- Use of collateral contacts in assessing the family
- Assessment of criminal background checks
- Referrals to Child Protection Team and Law Enforcement as appropriate
- Completeness of Child Safety Assessment
- Consultation with Children’s Legal Services as appropriate
- Referral for behavioral health assessment as needed

The supervisor will document in a case note in Florida Safe Families Network that the discussion occurred, summarizing any major points that may need further attention and potential trend characteristics to be considered in the future. The supervisor will provide documentation to the Circuit Administrator that discussions occurred as outlined in this guide. The Circuit Administrator must determine how the discussion process will be documented and managed at the local level.

Discussion Guide

A. History and Cultural Background

1. Tell me about this family; what are they like; do they have supports? (Include: Does the investigator understand the language and culture of the family, and if not, how is he/she communicating with the family?)

2. Tell me about the prior reports on this family, even those that were closed with “no indicator” findings. Were there priors on the mother as a victim? The father? Other household members? Do you have a sense that we’re getting more reports on the family and that the reports/allegations are getting to be more serious than prior reports? Do any family members have a criminal history; if so, how might this impact safety?
B. Quality of Contacts

3. How would you describe the family’s interactions with each other? Have you assessed each child’s safety?

4. Is/was the frequency and intensity of your contacts with the child and the family sufficient to thoroughly address the reported allegations and to assess the family’s strengths and needs?

5. What do the collateral contacts say as to the child’s current safety and potential future risks?

C. Safety

6. Have you observed any behavioral or physical indicators that the child is not thriving or is in a potentially dangerous environment? Did you involve CPT; if so, what were the findings?

7. Based on the family’s strengths and needs, are they able to provide a stable home life for the child?

8. Is there a plan in place that will help assure the child is kept safe – what is the [safety] plan?

D. Services

9. Is the family receiving the services they need based on your assessment? (Did you provide service referrals yourself? Did you assure they were engaged? Were services addressed through Case Transfer or Early Service Intervention agreements in which the CBC would make referrals and ensure engagement?)

10. Are the services in line with the goals of family preservation or reunification? Are there mental health, developmental, or substance abuse issues that require treatment?

E. Removals

11. Before the CBC placement authority took responsibility for placement, did the child stay overnight in an unapproved, unlicensed or office setting (including a hotel room)?

12. If you made the placement with a relative or non-relative, how did you assure the relative or non-relative was an appropriate placement setting for the child? Is there any potential danger due to “visitors” in the home?

13. Was the medical history form sufficiently completed so that the next caregiver had all of the medical information you knew about at the time?

14. Did the child have a medical diagnostic screening within 72 hours; if not is it planned/scheduled? Were any health problems identified; if so, what follow-up actions are planned?

F. Supervisor’s Assessment of Discussion

15. The investigation and subsequent maltreatment findings are based on well documented, properly weighted and well analyzed evidence.

16. All appropriate and required authorities were involved in the decision making process? (CPT, law enforcement, therapists, etc.)

17. The discussion has been documented in the FSFN case notes.
Quality of Practice Standards for Child Protective Investigators

Florida Department of Children and Families

Office of Family Safety

QUALITY ASSURANCE 7/1/2008 Version II

Robert A. Butterworth, Secretary
David Fairbanks, Assistant Secretary for Programs
Pat Badland, Director
This document would not have been possible without the assistance of the following staff who dedicated countless hours to helping the Department develop the standards and QA review protocols for the 2008 Quality of Practice Standards for Child Protective Investigations.

- Gail Perry, Office of Family Safety QA
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- Traci Klinkbell, QA Manager, Central Region
- Sharon Mitchell, QA Specialist, Southeast Region
- Leslie Chytka, Office of Family Safety QA
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Quality of Practice Standards for Child Protective Investigations

Underlying Principle

All staff must understand each person has a role in quality assurance. Everyone must be responsible for taking immediate action when there is any evidence the life, safety, or health of a child may be threatened. Whether the evidence is observed in the field, identified through formal QA review, or heard in an interview or other discussion with knowledgeable case participants or stakeholders, personal integrity and responsibility require action.

Family Last Name ___________ Intake# _____ County/Unit ___________
Investigator ___________ Supervisor _____ Date Received ________
Date Closed ___________ # of Prior Investigations ___________
# of Alleged Victims _______ Age of Youngest Alleged Victim _______

Emergency Removal

Ethnicity of Youngest Alleged Victim _____________________
Most Serious Alleged Maltreatment _____________________
Finding of Most Serious Alleged Maltreatment _______________
Alleged Perpetrator Type _____________________
Reporter Type _____________________

1. Was there an open case management case at the time the Investigation was received? Yes No
2. Was family receiving community services at the time the Investigation was received? Yes No
3. Did any prior reports allege the same general concerns? Yes No
4. Did any prior reports allege the same perpetrator (s)? Yes No
5. Did the same reporter report the family multiple times? Yes No
6. Are there immediate or ongoing safety concerns based on review? (If so, provide Request for Action form.) Immediate Yes No Ongoing Yes No

Emergency Removal?
DEFINITIONS

9 Requirement Achieved

- The specific requirements of the review element were met. A score of “9” documents the standard was met and no improvements were needed.

7 Requirement Substantially Achieved

- The specific requirements of the review element were met with some deficiencies or omissions.

- The reviewer must determine whether the deficiencies or omissions may have negatively impacted the CPI’s assessment of risk and child safety and the disposition of the investigation.

- Scenario: CPI investigates domestic violence allegations involving a family that recently relocated from another state.

- Although closed with “some” or “no indicator” findings, the CPI did not document a Child Welfare Out of State check or an out of state local law enforcement check, and it was ultimately determined the investigation did not meet legal sufficiency to file a petition.

- The family was offered and agreed to participate in a domestic violence program and/or Voluntary Protective Supervision services.

- If the reviewer believes the intervention was appropriate, despite the omission of these requirements, (that is, the out-of-state checks) this standard should be assessed as Substantially Achieved.

5 Requirement Partially Achieved

- The specific requirements of the review element were met with some significant discrepancies or omissions.
In the same scenario, the CPI documented an incident did occur in Florida, but the CPI did not document a Child Welfare Out of State check or an out of state local law enforcement check. The CPI closed the investigation after staffing it with CLS where it was determined the investigation did not meet legal sufficiency to pursue court ordered supervision, and the family declined services.

The completion of the above identified checks may have confirmed the Florida incident was not isolated and provided more evidence to deem the scenario legally sufficient.

The reviewer must use reasonable and professional judgment to determine whether the deficiencies or omissions significantly impacted the assessment of risk and child safety and the disposition of the investigation.

If the reviewer believes the assessment of risk and child safety, and the disposition of the investigation were negatively impacted this standard should be assessed as Partially Achieved.

0 Requirement Not Achieved

The specific requirements of the review element were not met.
Section I - Investigative Response
Reminder:

Always refer back to the Scoring Rubric when making a rating choice between a “7” or “5”
Background Checks

1.1 Required background checks were completed timely and the information was appropriately used to assess risk to each child.

1.1.1 Background checks were completed on all household members and report subjects age 12 and older.

- Prior Abuse Reports.
- DJJ. (ages 12-26)
- Local Law Enforcement.
- FDLE.
- Department of Corrections.
- Child Welfare Out of State. (if the record reflects the family resided in another state)
- Prior Case Management Records
- 911 Calls or Calls for Service
- Other

Requirements: CPIs are required to determine the immediate and long-term risk to each child by conducting department abuse history checks, provider history, state and federal records checks, including, when feasible, Department of Corrections’ records on the parents, legal custodians or caregivers, and any other persons in the household. CPIs must review all of the information in prior reports to the Florida Abuse Hotline, not just the findings of the prior investigations. Supporting documentation of completed checks must be maintained in the investigation file. A DJJ check will be accepted for children age 12 to 18 in lieu of a local history check.

Instructions and Considerations: Thorough background and record checks provide information on individual or family issues and may identify behavioral patterns that could create a safety risk to the child or affect family functioning. The reviewer must assess if the information obtained through these checks appropriately drove investigative decision-making, and determine if there was an increase in the seriousness or frequency of alleged maltreatments over time in which the CPI either did or did not recognize.

The extent of criminal background information required to facilitate a thorough assessment in some investigations may differ slightly in some cases, and the reviewer must determine if the information collected suffices to address safety and risks. For instance, 911 call history or local “calls for service” on reports alleging serious abuse, neglect, domestic violence, and/or substance abuse, should be completed, but for less serious allegations, the reviewer must determine if this specific check would have made a significant difference in determining child safety.

If a complete background check was not completed on all household members based on the above logic and rationale, the reviewer may rate the requirement as substantially or partially achieved using professional and reasonable judgment.
Additional Guidance: “Other” checks may include sexual predator listings, military disciplinary and family advocacy records, or NCIC and DJJ checks when a report subject has resided out of state. Evidence of the completed background checks must be found within the investigation record, i.e. assessments, supervisory reviews, notes, and when applicable, 2nd party review documentation.

Rating:

✓ Document “9” if the specific requirements of this review element were met.

✓ Document “7” if the specific requirements of this review element were met with some deficiencies or omissions, as long as the deficiencies or omissions did not impact the safety decisions or the outcome of the investigation.

✓ Document “5” if the specific requirements of the review element were met, but omissions could impact the safety decisions or outcome of the investigation.

✓ Document “0” if the specific requirements of this review element were not met.

1.1.2 Background checks were completed within the established timeframes on all household members and report subjects age 12 and older.

Instructions and Considerations: Assessing the timeliness in which background checks were requested and reviewed is important to show the information was considered throughout the course of the investigation. The date the background check was requested and obtained should be clearly documented in the file. If the required record check was completed timely (from the date of determining the demographics on the subjects – within 24 hours for prior abuse reports and within 72 hours for criminal histories), the requirement would be fully achieved. If done later in the process, the rating would be substantially or partially achieved depending on the thoroughness of the background check. The reviewer should specifically identify the checks completed timely, untimely or not completed at all. Note: Rate the response based on evidence if the responses were delayed for reasons beyond the CPI’s control.

Rating:

✓ Document “9” if the specific requirements of this review element were met.

✓ Document “7” if the specific requirements of this review element were met with some deficiencies, as long as the deficiencies or omissions did not impact the safety decisions or the outcome of the investigation.

✓ Document “5” if the specific requirements of the review element were met, but with significant omissions that could impact the safety decisions or outcome of the case.

✓ Document “0” if the specific requirements of this review element were not met.
1.1.3 Information obtained from the background checks was used to appropriately assess risk to each child.

**Requirements**: The reviewer must consider how the information obtained was applied to the assessment of risk, safety and service needs. Additional inquiries and information on arrests or convictions related to serious crimes should be found in the investigation record.

**Instructions and Considerations**: The reviewer must determine if the necessary information was gathered during the assessment process, and if the information was appropriately used to make overall child safety decisions. Some factors that should impact decisions related to assessment of child safety include: multiple reports of abuse and neglect involving the same perpetrator or same type of maltreatment; reports documenting prior or current domestic violence; ongoing substance abuse and/or mental health concerns; or any combination thereof. The reviewer should also consider how the investigator used background history of frequent visitors and paramours when assessing risks.

**Rating**:

- ✔ Document “9” if the investigation record documents necessary information was gathered and appropriately used to assess child safety and make decisions.
- ✔ Document “7” or “5” if the investigation record contained some but not all needed information or some but not all of the information was appropriately used to assess child safety and make decisions.
- ✔ Document “0” if needed information was not gathered or not considered in assessing child safety and making decisions.

**Reviewer Comments**:

*Reference: s. 39.301(9) (b) 3, F.S. & 65C-29.003 (j), & 65C-29.009, F.A.C.*
Diligent Attempts

1.2 Diligent attempts were made at least daily when a child victim was not seen immediately or within 24 hours of report receipt. If the initial attempt to contact the child victim was unsuccessful, regular attempts (daily and at varying locations and times of the day) are required until all child victims were seen.

Requirements: The CPI is required to make unannounced, on-site, face-to-face contact with all child victims within 24 hours of the time the report was taken by the Hotline. If the first attempt to contact the child victim was unsuccessful, the investigation record should document continued diligent attempts to contact the child victim. If the initial attempt to contact the child victim was unsuccessful, regular attempts (daily and at varying locations and times of the day) are required until all child victims are seen.

Instructions/Considerations: The purpose of the initial contact is to assess the child’s safety and begin an assessment of the family’s strengths and needs. The reviewer must assess compliance with the requirement for the ongoing diligent attempts to see the child victims. The reviewer must consider whether the investigation record documents the counselor went to the address listed on the report, as well as other possible locations, at different times of day. Additional efforts may include re-contacting the reporter to verify the address or contacting relatives, school personnel or law enforcement to assist in the efforts to locate. Written evidence of diligent efforts may include copies of contact letters or chronological notes documenting the inquiries and attempts made to locate the child victims.

Rating:

✓ Document “9” if the investigation record documents diligent efforts, consistent with the requirements outlined above, were made to see all child victims not seen in the first 24 hours.

✓ Document “7” or “5” if some diligent attempts did occur daily but did not include all possible locations or did not address all child victims not seen in the first 24 hours.

✓ Document “0” if insufficient no diligent attempts were made.

✓ Document “NA” if all child victims were seen within 24 hours of the report being accepted by the Hotline.

Reviewer Comments:

Reference: ss. 39.201(5) F.S. & 65C-29.013 (2) (a), F.A.C.
Seeing Children Timely

1.3 All “other” children named in the report and/or residing in the home were seen timely. If the initial attempt to contact the child victim was unsuccessful, regular attempts (daily and at varying locations and times of the day) are required until all child victims were seen.

Requirements: All “other” children residing in the home must be seen in a timely manner.

Instructions and Considerations: The CPI must see all children in the household, not just those listed as victims in the report, in order to assess risk and ensure safety. The nature of the allegations, ages of the children and proximity to the alleged perpetrator must be considered when determining whether the response was “timely”. Timeliness must be based on the risk to the “other children” and how quickly they must be seen in order to ensure safety.

Additional Guidance: Daily diligent efforts are not required to see “other” children named in the report; safety factors are the driving force. In addition, on-site visits and face-to-face interviews with the child, other siblings, other children in the home and family shall be unannounced unless it is determined by the department, designee, the sheriff’s office or contract service provider that an unannounced visit would threaten the safety of the child.

Rating:

✓ Based on the criteria described above, document “9” if all of the “other” children should have been and were seen within 24 hours.

✓ Document “7” if all of the “other” children were seen within 72 hours.

✓ Document “5” if all of the “other” children were seen after 72 hours but before closure.

✓ Document “0” if only some or none of the “other” children were seen before closure.

✓ Document “NA” if there were no “other” children or the “other” children were on runaway, out of state, in another county, or deceased.

Reviewer Comments:

Reference: s. 39.301 F.S. & 65C-29.003 (3) (b-d), F.A.C
Interviewing Children

1.4 An interview was conducted and addressed all maltreatments with the alleged child victim(s) and “other” child(ren) named in the report and/or residing in the home.

1.4.1 Interviews with child victim(s).

Requirements: An assessment must include a face-to-face interview with all of the alleged child victims, addressing each alleged maltreatment, and include a determination if the victim children were abused, abandoned or neglected.

Instructions and Considerations: The CPI must document that face-to-face interviews were conducted and all allegations were addressed. Timeliness should not be considered when assessing compliance with this review element.

Rating:

✓ As age appropriate, document “9” if each child victim was interviewed in relation to each maltreatment.

✓ Document “7” or “5” if all maltreatments were not addressed or all children were not interviewed regarding the maltreatments, depending on the degree of compliance.

✓ Document “7” or “5” if the child victim was too young to be interviewed or there was documentation the CPI attempted to interview the child victim, but the child victim refused to be interviewed, depending on the degree of compliance.

✓ Document “0” if there was no documentation the child victims were interviewed nor were attempts made (for children who are verbal and/or cooperative). Document “NA” if child was non-verbal or not located.

1.4.2 Interviews with “other” child (ren).

Requirements: An assessment must include a face-to-face interview with all of the “other” children, addressing each maltreatment, and include a determination regarding whether the “other” children were abused, abandoned or neglected.

Instructions and Considerations: The CPI must document that face-to-face interviews were conducted and all allegations were addressed with “other” children named in the report. Timeliness should not be considered when assessing compliance with interviewing children.
Rating:

✓ As age appropriate, document “9” if each “other” child was interviewed (or observed if non-verbal) in relation to each maltreatment.

✓ Document “7” or “5” if all maltreatments were not addressed or all “other” children were not interviewed (or observed) regarding the maltreatments.

✓ Document “7” or “5” if the “other” child was too young to be interviewed or there was documentation the CPI attempted to interview the “other” child, but the “other” child refused to be interviewed, depending on the degree of compliance.

✓ Document “0” if there was no documentation the “other” child was interviewed nor were attempts made (for children who are verbal and/or cooperative).

Reviewer Comments:

Reference: ss. 39.301 (9) (b); (10) (a-b) & 39.302, F.S.
Interviews with Caregivers

1.5 Interviews that addressed all maltreatments were conducted with the mother, father, other caregiver and alleged caretaker responsible (alleged perpetrator, if other than the mother or father), and other adult household members.

- Interview with mother.
- Interview with father.
- Interview with alleged caretaker responsible. (if not the mother or father)
- Interviews with other adult household members.

Requirements: The CPI’s assessment of child safety must include face-to-face interviews with the parents and other adults in the household. The CPI is required to conduct and document a face-to-face interview that addresses all alleged maltreatments with all adult subjects of the report and all adult household members residing in the home.

Instructions and Considerations: The interviews should be conducted face-to-face. The reviewer should be able to discern the roles of all household members from the investigation record, and the adult household members’ attitudes toward the child victim(s) and “other” children in the home should be well documented. Timeliness is not a factor when assessing compliance with this element. If one of the parents is non-custodial and/or does not reside in the child’s household, this individual should be contacted as a relevant collateral source and addressed under standard 1.9 re: collaterals.

Rating:

✓ Document “9” if all adult subjects of the report and all adult household members were interviewed regarding all of the alleged maltreatments.

✓ Document “7” or “5” if all of the alleged maltreatments were not addressed or all adult subjects and household members were not interviewed, depending on the degree of compliance and impact on child safety.

✓ Document “0” if the investigation record documented no interviews were conducted or attempted with all of the adult subjects of the report and all adult household members.

✓ Document “NA” if interviews were attempted, and the adult subject or adult household member refused to answer questions, an attorney or law enforcement prohibited contact with the alleged perpetrator or diligent efforts were made and the adult could not be contacted.

✓ Document “NA” if the mother, father, or alleged caretaker responsible did not live in the home and were not a subject of the report.

Reviewer Comments:

References: ss. 39.301(9) (b); (10) (a-b), F.S.
Observations and Interactions of the Children

1.6 Specific and relevant observations and interactions of the children with family members were completed and documented during the course of the investigation.

Requirements: The CPI must determine whether there is any indication that a child in the family or household was abused, abandoned or neglected, and the nature and extent of present or prior injuries.

Instructions and Considerations: To do so, the CPI must observe the child’s interaction with his/her family especially an alleged perpetrator or caregiver responsible as well as all other children in the household. The degree of documentation may differ slightly depending on the elements of the investigation and the age of the victims; however, interactions between the child and subjects of the report should be observed and considered relevant to the alleged maltreatment(s).

Additional Guidance: The CPI is required to document specific and relevant observations of the children during the investigation including, but not limited to, physical appearance, developmental progress, behavioral indicators and interaction with others in the household. The CPI is required to describe the physical and emotional state of children and relevant parent/child interactions. Observations documented in the file should give the reviewer a sense of each child’s present state of overall well-being. Phrases such as “free of marks and bruises” or “child appeared happy, healthy and bonded,” are not sufficient when assessing qualitative interactions and observations. More individualized and substantive statements are needed to fully assess child safety.

Rating:

✓ Document “9” if specific and relevant interactions between child(ren) and other household members were observed and documented in the investigation record.

✓ Document “7” or “5” if the CPI documented specific and relevant interactions and observations of some but not all of the children, but carefully consider the range between “7” or “5” relative to the seriousness of the alleged maltreatment.

✓ Document “5” if documented interactions or observations lacked specificity or relevancy as in “child was sleeping,” victim and/or “other children” were only seen at school.

✓ Document “0” if the CPI did not document specific and relevant observations of any of the children in the home.

Reviewer Comments:

Reference: s. 39.301(10) (b), F.S.; & 65C-29.003(3) (c), F.A.C.
Safety Assessment

1.7 The initial safety assessment process was completed with sufficient thoroughness to identify risks and develop a safety plan if needed.

 Requirements: The CPI is required to determine the immediate and long-term risk to each child during the child safety assessment process and documentation.

 Instructions and Considerations: The process and documentation should reflect information gathered through various means to support the need for immediate safety action(s) taken. The overall safety assessment should be appropriate given all of the information gathered about the family, and the steps taken to ensure safety should appropriately address present danger, child vulnerability, and protective capacity implications.

 Additional Guidance: The reviewer should review the safety actions planned and taken, and look for evidence the prior reports were fully considered during the assessment process. If no contacts could be completed within the first 48 hours, the reviewer should consider whether the CPI documented a review of the prior abuse and criminal history, accurately assessed child safety based on the family and child’s history and report allegations, and took appropriate steps. Safety plans should include appropriate, specific steps that will be taken to prevent further abuse/neglect and must go beyond a written pledge by the caretakers responsible or parents not to abuse/neglect the child again. The reviewer should determine if the safety constructs were appropriately assessed and if the overall safety assessment justification was consistent with the facts known.

 Rating:

 ✓ Document “9” if the overall safety assessment was appropriate and the steps taken to ensure child safety addressed the implications for child safety.

 ✓ Document “7” or “5” or “0” using professional and objective judgment to determine how thorough the assessment was, or was not, and how effective the safety plan was, or was not.

 Reviewer Comments:

 Reference: s. 39.301(9) (b) 5&6, F. S.; & 65C-29.003(5) (a), F.A.C.
Factors for Second Party Review

1.8 The investigator and supervisor identified appropriate factors requiring the completion of second party review and such review was completed and completed within 72 hours.

Requirements: Second party reviews are required 72 hours after the receipt of the automated assessment when the report documents one of the following criteria: caregiver is responsible for death or serious injury of another child; or any two of the following three criteria are met:

1) child is age four or younger,

2) child is nonverbal,

3) prior reports involve any of the subjects of the current report regardless of findings or there is a current report of actual serious or severe injury, neglect or threatened harm.

Instructions and Considerations: The reviewer must determine if a second party review was completed when required, based on the requirements documented above.

Rating:

✓ Document “9” if a second party review was required, appropriately referred, and completed timely.

✓ Document “7” if the second party review was required, appropriately referred, but not completed timely.

✓ Document “5” if the CPI did not record the appropriate factors and the investigation was not initially referred to second party but received a second party review in a subsequent submission based upon the directive of a supervisor.

✓ Document “0” if a second party review was required and not completed.

✓ Document “NA” if a second party review was not required.

Reviewer Comments:

References: 65C-29.003(6) (d), F.A.C.
Collateral Contacts

1.9 Relevant collateral contacts were completed during the course of the investigation.

Requirements: Relevant collateral contacts are necessary to assist the CPI in corroborating or refuting the allegations contained in the report. A specific number of contacts is not required, but the relevancy of completed collateral contacts is critical. Note: if the child has a non-custodial parent who does not reside in the child’s household but is involved in the child’s life, this individual should be contacted as a collateral source.

Instructions and Considerations: Relevant collateral contacts are individuals who have contact with the child or otherwise have pertinent knowledge about the child, the child’s condition, and/or the alleged circumstances or maltreatment. This can include but is not limited to extended family members, family friends, non-custodial parent, service providers, school personnel, neighbors and other community members who have direct knowledge or information regarding alleged maltreatments and the family’s situation. If collateral contacts were completed, but none were “relevant” to the situation, the standard is not met.

Rating:

✓ Document “9” if relevant collateral contacts were made to provide needed corroboration or additional information regarding the report allegations.

✓ Document “7” if most collateral contacts were relevant.

✓ Document “5” if only some contacts were relevant to the presenting concerns and additional contacts were warranted.

✓ Document “0” if no relevant collateral contacts were completed.

Reviewer Comments:

References: s. 39.301(10) (b) 2, F.S.; & 65C-29.003(9) & 30.001(28), F.A.C.
Obtaining Pertinent Information from Collaterals

1.10 Pertinent information was obtained from the collateral contacts and was considered when assessing the overall safety of the child and/or the need for services.

Requirements: The CPI is required to document how the information obtained from collateral contacts was used in assessing the overall safety of the child and/or need for services and supervision.

Instructions and Considerations: The reviewer should assess whether pertinent information was obtained and considered in assessing child safety, identifying and addressing the service needs of the family, and determining the allegation findings and appropriate disposition. If comparable collateral contacts provided conflicting information, the investigation record should reflect the basis for considering one contact more credible than the other.

Rating:

✓ Document “9” if appropriate and pertinent information was obtained from relevant collateral contacts and it was appropriately used to assess the overall safety of the child, need for services, and investigative findings.

✓ Document “7” or “5” if some, but not all of the needed information was obtained from relevant collateral contacts, and was appropriately used to assess the safety of the child, need for services and investigative findings.

✓ Document “0” if none of the right questions were asked or if the information was not used to assess the overall safety of the child and/or need for services and/or supervision.

✓ Document “NA” if review standard 1.9 documented no relevant collateral contacts were completed and was rated “0”.

Reviewer Comments:

References: ss. 39.301(10) (b) 2, F.S.; & 65C-30.001(28) & 65C-29.003(9), F.A.C
Professional Assessment of Others

1.11 Consideration of other professionals’ assessment findings and recommendations in the determination of child safety and ongoing protective interventions was documented in the investigation record or automated information system.

Requirements: This is specific to past or current assessments requested and/or received during the current investigation, and may include domestic violence, mental health, developmental, behavioral, substance abuse, or other specialized assessments/evaluations needed to make a determination regarding child safety and ongoing protective interventions. This does not apply to Child Protection Team (CPT) assessments/recommendations which are addressed in standard 1.15.

Instructions and Considerations: All written documentation received from professionals should be included in the investigation file. Consideration of assessment information should be evident in maltreatment findings or report disposition/services decisions. If assessment findings or recommendations were not followed, the reason for this should be documented in the investigation record or automated information system.

Rating:

✓ Document “9” if the CPI documented and considered other professionals’ assessment(s) and recommendation(s) in the determination of child safety and the ongoing protective interventions.

✓ Document “7” or “5” if the CPI considered some of the professionals’ assessments and recommendations, and did not provide a rationale for not following all recommendations.

✓ Document “0” if no professionals’ assessments and recommendations were considered in the determination of child safety and ongoing protective interventions.

✓ Document “NA” if no professional assessments and recommendations were requested or received during the course of the investigation.

Reviewer Comments:

Reference: Department of Children and Families, Office of Family Safety, Best Practice
Children’s Legal Services Staffing

1.12 A Children’s Legal Services staffing was held when required, and when the investigation was legally sufficient, a petition was filed or a valid reason for not filing a petition was documented.

1.12.1 A Children’s Legal Services staffing was held when required.

Requirements: A Children’s Legal Services (CLS) staffing is required when an investigation is assessed to be high risk for any reason, but specifically when an investigation involves:
1) young parents or legal custodians,
2) repeated use of illegal drugs or domestic violence,
3) significant medical neglect or severe abuse, or
4) to determine if there is legal sufficiency to file a shelter or dependency petition on behalf of the child.

Instructions and Considerations: A CLS staffing may be documented through a staffing form, petition, request for CLS review, court orders or investigation chronological notes. The file should reflect a valid reason for not filing a petition.

Rating:

✓ Document “9” if the investigation record contains evidence the investigation was staffed with Children’s Legal Services when required, regardless of the outcome of the staffing.

✓ Document “0” if a staffing was required based on the criteria outlined above but not documented. Document “0” if the CPI assessed “low risk” which removes the requirement to staff, but the reviewer found the investigation to be at high risk in which case it should have been staffed.

✓ Document “NA” if a CLS staffing was not required

1.12.2 A dependency petition was filed or a valid reason for not pursuing dependency was documented, when the Children’s Legal Services staffing documented legal sufficiency.

Requirements: If it is determined that a child is in need of the protection and supervision of the court, the department is required to file a dependency petition.

Instructions and Considerations: The decision to file a dependency petition should result in subsequent court action unless the investigation record documents a compelling reason not to pursue a dependency action. The reviewer should determine if the investigation supported and/or the staffing results recommended a dependency petition be filed. If the reviewer determines that evidence supports a dependency action then documentation that an investigation was not legally sufficient is not an adequate response.
Rating:

✓ Document “9” if:
  o the investigation supported and/or the staffing recommended a dependency petition be filed and a petition was filed; or

  o the investigation record documented a compelling reason not to pursue a dependency action; or

  o the staffing documented no legal sufficiency and the reviewer agrees court intervention was not warranted and no dependency petition was filed and the reviewer agrees court intervention or further supervision services were not warranted.

✓ Document “0” if legal sufficiency and a dependency petition was not filed or the investigation supported but the staffing recommended no petition be filed and no petition was filed. The reviewer should document why a dependency petition was warranted.

✓ Document “NA” if “NA” was documented for review standard 1.12 (a).

Reviewer Comments:

Reference: ss. 39.301(8) & (8) (b) & 39.401(1-3), F.S.
Referral to the Child Protection Team

1.13 The alleged child victim(s) was referred to the Child Protection Team and the referral was made timely when required.

1.13.1 A referral was made to the Child Protection Team (CPT) when required.

Requirements: If CPT services were indicated following the initial investigation, evidence of a referral for services must be found in the investigation record. The reviewer should determine if the allegation or subsequent investigative activities determined that any one of the following CPT referral criteria was met:

1) Injuries to the head, bruises to the neck or head, burns, fractures in a child of any age.

2) Bruises anywhere on a child 5 or younger.

3) Any report alleging sexual abuse of a child.

4) Any sexually transmitted disease in a prepubescent child.

5) Reported malnutrition of a child and failure of a child to thrive

6) Reported medical neglect of a child.

7) Any family in which one or more children have pronounced dead on arrival at a hospital or other health care facility, or have been injured and later died, as a result of suspected abuse, abandonment or neglect, when any sibling remains in the home.

8) Symptoms of serious emotional problems in a child when emotional or other abuse, neglect, abandonment is suspected.

NOTE: If, during an investigation, circumstances indicate the need for a child to receive a medical evaluation or other CPT assessment or services in order to determine whether abuse or neglect has occurred (such as when a child expresses pain without visible injury) a referral to CPT should be made even if the injury did not meet mandatory referral criteria.

Instructions and Considerations: Determine if the allegation or circumstance met one of the criteria defined in the statute. If the report met the criteria for a mandatory referral and a CPT service was not provided, an exception form should be in the file documenting the reason why no referral was made. Assessment is based on referrals as required per law, and includes some specific exceptions. The following circumstances document when a face-to-face medical evaluation may not be required, even when the above have been alleged:
- Child was examined for the alleged abuse or neglect by a physician, who is not a member of the child protection team, and a consultation between physician and CPT has occurred.

- Examining physician concludes that a further medical evaluation is unnecessary.

- CPI, with supervisory approval, has determined, after conducting a child safety assessment, that there are no indications of injuries. (Must be documented in the file).

- CPT pediatrician determines that a medical evaluation is not required.

**Rating:**

- ✓ Document “9” if the investigation met the CPT referral criteria (or the investigation circumstances warranted a CPT referral) and a referral was made to the CPT. (Refer to 1.16 if investigation involves an exception.)

- ✓ Document “0” if the investigation met the CPT referral criteria (or the investigation circumstances warranted a CPT referral) and no referral was made.

- ✓ Document “NA” if the report did not meet the referral criteria.
1.13.2 The referral was timely.

Requirement: The reviewer should determine if the allegation or circumstance met one of the CPT referral criteria outlined in the prior question. If CPT services were indicated following the initial investigation, evidence of a referral for services should be found in the investigation record.

Instructions and Considerations: The timeliness of the referral should be considered if an injury was present. It is appropriate that the referral be made as soon as the child/victim has been contacted.

Additional Guidance: The reviewer must determine if the allegation or circumstance met one of the criteria enumerated in the statute. If the report met criteria for a mandatory referral and a CPT service was not provided, an exception form should be signed by the supervisor and in the file. There is no specified time frame for referring children to CPT; however, the reviewer is required to assess timeliness based on the presenting circumstances. In all investigations involving serious physical injuries, sexual abuse, malnutrition or other maltreatments where a medical evaluation is needed to ensure safety or preserve evidence, the CPI should seek immediate/same day assessment of the child by CPT. If the child sustained minor injuries, a referral within 24 hours may be warranted to ensure the injury is documented before it fades.

Rating:

✓ Document “9” if all of the child victims were referred to CPT timely.

✓ Document “7” or “5” if some, but not all, of the child victims were referred to CPT timely.

✓ Document “0” if none of the child victims were timely referred to CPT.

✓ Document “NA” if a CPT referral was not required.

Reviewer Comments:

Reference: s. 39.303(2-4), F.S.
Documentation of Child Protection Team Discussion

1.14 The date, time, and specific information discussed with the Child Protection Team (CPT) at the time of initial referral were documented in the investigation file.

Requirements: The investigation record or the automated information system should contain documentation of the date and time relevant background information was shared with the Child Protection Team.

Instructions and Considerations: The documentation may include information related to the current situation; a brief family history; subject and collateral statements; prior history in Florida, as well as other states in which the family is known to have resided; any known criminal information; and the involvement of other professionals in the care and treatment of the child and/or family. As new information develops throughout the investigation that warrants continued CPT involvement, the Child Protection Investigator must continue to update CPT.

Rating:

✓ Document “9” if the record indicates compliance with all of the requirements.

✓ Document “7” or “5” if the CPI complied with some but not all of the requirements.

✓ Document “0” if the CPI did not comply with any of the requirements.

✓ Document “NA” if no referral was required to the CPT.

Reviewer Comments:

Following Child Protection Team (CPT) Recommendations

1.15 CPT assessment findings and recommendations related to child safety were followed or the rationale for not following the assessment/recommendations was documented.

**Requirements:** Any written documentation received from CPT should be included in the investigation file. Consideration of CPT assessment information should be evident in child safety decisions. If assessment findings or recommendations related to child safety were not followed, the reason for this should be documented in the investigation record or automated information system. Note: This applies to CPT only. Information received from other professions is addressed in Standard 1.11.

**Rating:**

☑️ Document “9” if the CPI followed CPT recommendations or documented a justification for not following these in the investigation record or automated information system.

☑️ Document “7” or “5” if the CPI considered some assessment information/followed some recommendations, but did not provide a rationale for not following all information or recommendations.

☑️ Document “0” if none of the assessment information or recommendations were followed and there was no justification for not following the assessments/recommendations found in the investigation record or automated information system.

☑️ Document “NA” if there was no need to refer to CPT and thus no CPT recommendations.

**Reviewer Comments:**

**Reference:** Department of Children and Families, Office of Family Safety, Directive on the Use of Professional Opinions, Dated October 12, 2006
Supervisory Review of Exceptions

1.16 When the report met mandatory Child Protection Team referral criteria and a face-to-face medical evaluation was not done, the investigation record documented the supervisor approved the exception decision.

Requirements: This exception applies only to children whose circumstances require a medical evaluation. These are the only conditions in which a CPT referral can be waived by the Department. A face-to-face medical evaluation by CPT is not necessary when: (a) The child was examined for the alleged abuse or neglect by a physician who is not a member of the CPT and a consultation between the CPT board-certified pediatrician, advanced registered nurse practitioner, physician assistant working under the supervision of a child protection team board-certified pediatrician or registered nurse working under the direct supervision of a CPT board-certified pediatrician, and the examining physician concluded a further medical evaluation was unnecessary; (b) The CPI, with supervisory approval, determined after conducting a child safety assessment, there were no indications of injuries as described in review element standard 1.13; or (c) The CPT board-certified pediatrician determined a medical evaluation was not necessary. Notwithstanding (a), (b), and (c), a CPT pediatrician may determine a face-to-face medical evaluation is necessary.

Additional Guidance: The reviewer should look for a copy of the CPT Exception (“Waiver”) form signed by the supervisor or chronological note by the CPI supervisor approving the exception.

Rating:

✓ Document “9” if the report met requirements for a mandated referral, the CPI determined there were no indications of injury, an exception to the medical evaluation was completed and the supervisor approved the exception (either found in a specific form or in the investigation record/automated information system.

✓ Document “0” if the child(ren) the investigation met the criteria for a mandatory referral, a referral was not made and there was no exception to the mandatory referral signed by the supervisor found in the investigation record/automated information system.

✓ Document “NA” if the presenting concerns did not meet the mandatory referral criteria or the exception did not apply.

Reviewer Comments:

Reference: ss. 39.303(2) (a-h), & 39.303 (4) (b), F.S.
Incident Dates

1.17 The correct Incident Date was entered in the investigation report with verified findings.

Requirements: The Incident Date refers to the most recent date the specific alleged maltreatment occurred, or may have occurred, for each victim. This date may be estimated or approximated. This question is only applicable to investigations with one or more “verified” findings.

Instructions and Considerations: If the maltreatments for the victim are “Verified” in this investigation, the Incident Date should be the most recent date the specific maltreatment was known or estimated to have occurred (prior to the finding being entered). If the maltreatment(s) for the victim is “Verified” with findings which have been occurring continuously over time, such as neglect, the date the allegation was made that resulted in the report being taken or the date the investigator added the maltreatment to the report should be entered.

Rating:

✓ Document “9” if the date entered was correct and consistent with the Incident Date guidelines.

✓ Document “0” if the date entered was not consistent with the Incident Date guidelines.

✓ Document “NA” if the investigation documented “Some” or “No” Findings.

Reviewer Comments:

Reference: Department of Health and Human Services, Agency for Children and Families, Adoption & Foster Care Analysis and Reporting System (AFCARS)
Maltreatment Findings

1.18 All maltreatment findings were supported by the information gathered and appropriately documented in the investigative record.

Requirements: The following guidelines should be followed.

- Verified findings – a preponderance of the credible evidence indicates that the maltreatment (injury, harm or threatened harm) was the result of abuse/neglect.

- Some Indicators findings – credible evidence, which does not meet the “preponderance” standard to support the maltreatment was due to abuse/neglect. No Indicators findings – no credible evidence to support the alleged maltreatment.

- “Preponderance” means superiority in terms of weight or quality/importance. “Credible” means offering reasonable grounds for being believed.

These terms are defined in the Florida Abuse Hotline Desk Reference. Information in the investigative record should be sufficient to corroborate or refute the allegations.

Instructions and Considerations: Consider whether information obtained from the investigation activities supported the findings entered the alleged maltreatment(s).

Additional Guidance: The reviewer should note in the comment section if maltreatments were identified during the course of the investigation, but not added to the report. The omission may require a new report be called to the Florida Abuse Hotline by the QA Reviewer.

Rating:

- Document “9” if the investigation record contained sufficient support for all maltreatment findings initially identified, as well as subsequently identified during the course of the investigation.

- Document “7” or “5” if the investigation record provided sufficient support for some but not all of the maltreatment findings or if an additional maltreatment(s) should have been added and was not.

- Document “0” if the investigation record failed to document sufficient support for all of the maltreatment findings initially identified or subsequently identified during the course of the investigation.

Reviewer Comments:

Reference: 39.301(10) (b), F.S.
Requests for Early Services Intervention

1.19 If at any point during the investigation placement of the child outside of the home was a possibility, the CPI requested Early Services Intervention (ESI) to determine if the Community Based Care could provide family preservation services that would allow the child to remain safely in the home.

**Requirement.** This standard is not mandated statutorily or required in Administrative Code, Operating Procedure or CBC contracts. It is a best practice measure (Quality Practice Standard #1), which reads:

- ESI will prevent unnecessary placements by initiating family preservation services.
- It will also start a multi-disciplinary team pre-placement process when placement is necessary, which will enhance stability.

This response will not be rolled up into the overall findings for the CPI review during the first review period. Data gathered from this question will be used to provide baseline information for the state in developing future practice directives.

**Rating:**

- ✔ Document “9” if placement was a possibility and an ESI staffing occurred, regardless of the outcome of that staffing.
- ✔ Document “0” if placement was a possibility and no ESI staffing was held.
- ✔ Document “N/A” if there was no possibility of placement during the investigation.

**Reviewer Comments:**

Identification of Service Needs

1.20 Based on the child/family needs, the immediate service and/or ongoing service needs were appropriately identified for the child, mother, father, other caregiver and/or caretaker responsible, if other than the mother or father.

   a) Child. (Not restricted to focus child or child identified as the victim in the abuse hotline report.)
   b) Mother
   c) Father
   d) Other Caregiver or Caretaker Responsible. (if other than the mother or father and has access or ongoing contact with the child)

Requirement: One of the requirements for conducting an investigation is to determine the protective, treatment, and ameliorative services necessary to safeguard and ensure the child’s safety and well-being and development, and cause the delivery of those services. The CPI is required to identify the immediate service needs of the children and families served. Administrative Code states if the Department or Sheriff’s Office Child Protective Investigator determines a child requires immediate or long term protection, such services shall first be offered for voluntary acceptance unless there are high risk factors that may impact the ability of the parents or legal custodians to exercise judgment. It further states if the Department or Sheriff’s Office or contracted service provider determines the need to engage ongoing services, an Early Services Intervention staffing shall be requested by the CPI or the CPI Supervisor. During the staffing, the CPI is to provide any recommendations for expedited services. Examples of immediate service needs may include at risk childcare, food, housing, clothing, protection through a domestic violence shelter, etc.

Instructions and Considerations: Immediate service needs require the CPI to complete the service referrals rather than delay until the family is staffed for ongoing supervision services or because there is no plan to refer for ongoing supervision services. The reviewer must determine if the CPI appropriately identified the immediate service needs of the family and/or the need for ongoing supervision services to stabilize the family and mitigate the risks.

Rating:

✓ Document “9” if the CPI identified the immediate service needs of the family and/or the ongoing supervision service needs to stabilize the family and mitigate the risks.

✓ Document “7” or “5” if the CPI identified some but not all of the immediate service needs and/or ongoing needed supervision services to stabilize the family and mitigate the risks.

✓ Document “0” if the CPI did not identify any of the immediate service needs and/or ongoing supervision needs, but should have based on the facts of the case.

✓ Document “NA” if the investigation documented no need for immediate services or ongoing supervision services.
If the family is already receiving services and the reviewer concurs with continuation of all or some of those services, document “9,” “7,” or “5,” as appropriate. Do not use “NA” just because the family was already receiving services or was under supervision.

Reviewer Comments:

Reference: ss. 39.301(9) (b) 6; & 39.301(14) (a) 2, F.S.; & 65C-29.00(3) (k-I) & 65C-30.002 (1) (d) (12), F.A.C
Referral for Services

1.21 If immediate services or ongoing supervision was needed, referrals for these services were documented for the child, mother, father and other caregiver or caretaker responsible (if other than the mother or father).

   a) Child. (Not restricted to the focus child or child identified as the victim in the abuse hotline report.)
   b) Mother
   c) Father
   d) Other Caregiver or Caretaker Responsible. (if someone other than the mother or father and has access or ongoing contact with the child)

Requirements: The CPI is required to identify and make arrangements for the immediate service and/or ongoing supervision needs of the children and families served. The immediate service needs may include at risk childcare, food, housing, clothing, protection through a domestic violence shelter, etc.

Instructions and Considerations: The reviewer should assess compliance with this review element for the entire family, not just the victim/child identified by the Hotline. The reviewer must determine if the CPI identified either immediate services or ongoing supervision needs or should have identified immediate services or ongoing supervision needs, and whether a referral for these services was completed.

Rating:

✓ Document “9” if the CPI documented referrals for all immediate services and/or ongoing supervision needs.

✓ Document “7” or “5” if the CPI documented referrals for some of the immediate services and ongoing supervision needs.

✓ Document “0” if the CPI did not document referrals for any of the immediate services or ongoing supervision needs.

✓ Document “NA” if the investigation determined no need for immediate services or ongoing supervision, or the family is currently receiving ongoing services and no additional service needs were identified.

Reviewer Comments:

Reference:ss. 39.301(8) (a) & 39.301(9) (b) 6 & 39.301(14) (a), F.S.; & 65C-29.003(3) (k-l); & 65C-30.002(1) (g) 1, F.A.C.
Engaging Services

1.22 If documentation reflects the need for immediate services and/or ongoing supervision, the investigation record contained evidence the services were engaged.

Requirements: The CPI is responsible for following up on referrals to the services deemed necessary to ensure immediate safety and mitigate risk, when the services are assessed to be critical to the protection of the child(ren) in the home.

Instructions and Considerations: The reviewer should assess compliance based on the identification and engagement of all identified immediate services and ongoing supervision needs of all family members, and not just the identified child victims or focus child under review. The reviewer is required to consider child safety and the level of family functioning when assessing the CPI’s performance in ensuring the engagement of services. If voluntary services were identified as needed as a result of a CLS staffing, the investigation record should confirm the family agreed to voluntary supervision services once contacted by the case manager responsible for ongoing supervision services. (Note: If voluntary services are recommended and the family declined the service, it should be clearly documented that no further action could be taken based on the existing concerns.) The reviewer may assume engagement if court ordered supervision was pursued. Documentation of engagement may be confirmed through telephone calls, reports or a chronological note entry. If a referral is made for a community service such as parenting or in-home prevention services and the service is deemed critical to reducing risk, the reviewer should look for evidence the family has followed through on the referral or the provider has made contact with the family. The reviewer should assume engagement has occurred if the provider and family have made contact and a waiting list exists.

Rating:

✓ Document “9” if voluntary or diversion services were required to reduce the identified risk to the children and the investigation record documented the needed services were engaged.

✓ Document “7” or “5” if the investigation record documented engagement with some but not all needed services or supervision to reduce risk to the children.

✓ Document “0” if the investigation record did not document engagement with any of the needed services or supervision identified as critical to reducing risk.

✓ Document “NA” if the investigation documented no needs for immediate or ongoing services, if the family declines services, or the family is currently receiving ongoing services and no additional service needs were identified.

Reviewer Comments:

Reference: ss. 39.301(8) (a); & 39.301(14) (a), F.S.
Communication Between the Child Protection Investigator and Case Manager

1.23 If there was an active services case when the report was received, timely and appropriate communication and collaboration between the CPI and Case Manager occurred to assure mutual understanding of history and current events.

**Requirements:** The CPI is required to notify the assigned Case Manager within one workday when there was an active service case at the time a report was received for investigation. However, there should be more than notification; there should be evidence of meaningful communication between the CPI and the Case Manager or Case Management Supervisor as the CPI needs to know what is happening in the services case and the case manager needs to be very aware of the investigative events, subsequent findings and dispositional decisions.

**Rating:**

- ✓ Document “9” if communication occurred within two workdays of receiving the report and there is documentation that the CPI and case manager collaborated in making appropriate investigation decisions on behalf of the child.
- ✓ Document “7” if the CPI made continuous attempts to communicate with the case manager or supervisor within a reasonable amount of time, and upon contact collaborated with case management in making appropriate investigation decisions on behalf of the child.
- ✓ Document “5” if CPI made some attempts throughout the investigation to collaborate with case management, but did not assertively pursue contact and collaboration.
- ✓ Document “0” if there is no documentation to support attempts to contact case management and thus no collaborative communication occurred.
- ✓ Document “NA” if the child was not active to child welfare supervision services during the time the report was under investigation. The reviewer should consider weekends and holidays when determining compliance with this review element.

**Reviewer Comments:**

**Reference:** 65C-30.015(1), F.A.C.
Thoroughness of the Investigation

1.24 The investigation was thorough and appropriate steps were taken to ensure child safety.

Requirements: For each report received, the CPI is required to determine the protective, treatment, and ameliorative services necessary to safeguard and ensure the child’s safety, well-being and development, and cause the delivery of those services through the early intervention of the department.

Instructions and Considerations: The CPI must use information obtained throughout the investigation to determine the implications to safety, and include criminal history, priors, and strengths and concerns to arrive at an appropriate recommended disposition. A sound decision should be derived through collaborative efforts among the investigator, services Case Manager and CLS (DCF, Office of the Attorney General or Office of the State Attorney) as they are involved. The reviewer must evaluate how well the CPI used all of the information gathered to appropriately assess child safety, immediate and long-term risk, and whether the investigator’s actions contributed positively to an appropriate investigative closure decision.

Additional Guidance: The reviewer should consider whether the child was living in a safe environment, whether a safety plan was needed and developed, whether the plan was adequate to ensure the child’s continued safety, and whether the family was engaged with the services needed to reduce risk to the children prior to closing the investigation.

Rating:

✓ Document “9” if the investigation record contains evidence that all necessary investigative activities were completed, to include collaborative contacts in making appropriate safety decisions and investigative dispositions.

✓ Document “7” if most of the necessary investigative activities were completed, to include collaborative contacts in making appropriate safety decisions and disposition and child safety was not compromised.

✓ Document “5” if some investigative activities were completed, to include collaborative contacts in making appropriate safety decisions and disposition but some of the omissions may have compromised child safety.

✓ Document “0” if the investigation record does not contain documentation of the necessary investigative activities, including the lack of appropriate communication and collaboration between the parties, and which compromises child safety.

Note: Reviewer must carefully consider any responses of “5” or “0” to this standard to determine if a Request for Action is needed to ensure child safety.

Reviewer Comments:

Reference: ss. 39.301; & 39.302, F.S.
American Indian or Native Alaskan

1.25 The case file documents CPI’s discussion with the parents or legal custodian as to whether or not they are of American Indian/Native Alaskan descent.

Requirements: The CPI is required to document an inquiry in every investigation whether the child is of American Indian or Alaskan Native descent. No assumptions should be made about ancestry based on the child’s or family members’ physical appearance or surnames.

Instructions and Considerations: The reviewer should find evidence of dialogue with a parent or legal custodian either in an investigation case note or signed document that testifies the question was asked.

Rating:

✓ Document “9” if there is documentation that the question was asked.

✓ Document “0” if there no documentation was found.

Reviewer Comments:

Reference: 65C-28.013(1)-(7), F.A.C.; 65C-30.001(67-69) & (146); 65C-30.002(1) (a) & (1)(e)4, F.A.C.
Supervisory Guidance and Direction

1.26 Appropriate supervisory guidance and direction were provided that ensured a thorough investigation was being completed.

   a) Initial supervisor guidance
   b) Second party review guidance
   c) On-going supervisor guidance

Requirements: The CPI Supervisor is required to review all investigations and provide appropriate guidance and direction.

Instructions and Considerations: The reviewer should consider the information known or needed at the time the supervisor reviewed the investigation record and whether the guidance and direction were appropriate given what was known and needed before the conclusion of the investigation.

Rating:

✓ Document “9” if the investigation record contains appropriate supervisory guidance and direction.

✓ Document “7” or “5” if the investigation record documented some but not all of the needed supervisory guidance and direction were provided. Consideration should be given to guidance relative to child safety and disposition.

✓ Document “0” if the investigation record failed to document needed supervisory guidance and direction.

✓ Document “NA” if the supervisor's signature affirmed the CPI’s actions to date were appropriate and the investigation record documentation supported no further supervisory guidance and direction were needed.

Reviewer Comments:

Reference: s. 39.301(4), F.S.; & 65C-29.003(6) (b), F.A.C.
Supervisory Follow-up

1.27 Follow through occurred on the supervisory guidance and direction provided, or there was documentation that it was no longer necessary.

   a) The CPI followed through on the supervisory guidance and direction.

   b) The CPI supervisor ensured CPI followed through on supervisory guidance and direction provided or the reason(s) the guidance and direction provided was no longer necessary was documented.

   c) The CPI supervisor ensured the CPI followed through on the 2nd party reviewer guidance and direction, or documented justification that actions were no longer necessary.

Requirements: The CPI Supervisor is required to review investigations and provide guidance to the CPI throughout the investigation. The CPI should complete the follow-up activities that were recommended by the CPI Supervisor as quickly and thoroughly as possible.

Instructions and Considerations: The reviewer must identify all of the guidance and direction provided by the CPI Supervisor and the information documenting the CPI’s follow-through on the guidance and direction provided. Consider all information documented in the investigation record to assess compliance with this review element.

Additional Guidance: The reviewer should not consider follow-up on guidance initially provided by the CPI Supervisor if the CPI Supervisor documented the initial guidance and direction were no longer needed, and the reviewer agrees the guidance and direction were no longer needed.

Rating:

✓ Document “9” if the CPI followed up on all of the supervisory guidance and direction provided.

✓ Document “7” or “5” if the CPI followed up on some but not all of the supervisory guidance and direction provided. Consideration should be given to guidance relative to child safety and disposition.

✓ Document “0” if the CPI followed up on none of the supervisory guidance and direction provided.

✓ Document “NA” if the supervisor documented no specific guidance and direction or documented the guidance and direction provided earlier were no longer needed.

Reviewer Comments:

Reference: 65C-29.003(6) (b) 1, F.A.C.
1.28 The Results Determination (closure options) documented in the automated information system is the appropriate choice based on the information obtained during the investigation.

Requirements: The CPI must choose an option from the “Determinations” field in Florida Safe Families Network (FSFN) when the investigation is being closed. The CPI must choose the most appropriate option that accurately reflects the circumstances of the investigation, the results of the investigation and rationale for closing.

Instructions and Considerations: Review the investigative information in FSFN before answering this question. Go to the Investigation and choose the “Results” tab. Determine if the most appropriate code was used based on the information gathered during the investigation.

Rating:

✓ Document “9” if the CPI chose the appropriate closure category.

✓ Document “0” if the CPI chose an inappropriate closure category.

✓ There is no range. If “0” reviewer must provide comment.

Reviewer Comments:

Reference: 65C-30.001(86), F.A.C.
Section II - Emergency Removal
Services Prior to Removal

2.1 Prior to the removal, the CPI made concerted efforts to provide appropriate services that would allow the child to remain safely in his/her own home.

Requirements: A child should not be removed from his/her home if, with the provisions of intervention and preventive services, he/she could safely remain in the home.

Instructions and Considerations: Reviewers should not assume the requirement is achieved simply based on “reasonable efforts” language in court orders. The reviewer must assess the investigative response based on evidence regarding the reasons for removal found in the CSA chronological notes, investigative decision summary, emergency shelter petition, Pre-Disposition Study or elsewhere in the investigation record. The reviewer should determine if the CPI made concerted and reasonable efforts to provide appropriate services to the family to prevent removal.

Concerted efforts refer to conducting a safety assessment to identify the services necessary to ensure child safety in the home, to engage the family in those services and to facilitate the family’s access to the services, including making sure the services are readily available. Appropriate services are those provided to, or arranged for the family with the explicit goal of ensuring the child’s immediate safety and meeting the specific needs or circumstances of the family. For example, if in-home intervention services/mobile crisis response team services were immediately available to ensure safety, removal may not be necessary. In another example, if the parent alleged to be the caretaker responsible is willing to leave the home and the non-offending parent can ensure his/her continued absence, is willing to engage in appropriate services and can ensure the child’s immediate and ongoing safety, removal may not be necessary.

Rating:

✓ Document “9” when the investigation file contains evidence the CPI’s made concerted efforts to provide services that would allow the child to remain safely in his/her home.

✓ Document “0” when the investigation record does not document support for the CPI’s decision to remove the child based on the evidence and the circumstances that existed at the time of the child’s removal.

Reviewer Comments:

Reference: Task Force on Child Protection (October 2007 Recommendations) ss. 39.40(1)(b)1-3; & 39.401(3); & 39.402(l)(a-c)&(2) & (7), F.S.
Indian Child Welfare Act

2.2 The investigation file documented compliance with the Indian Child Welfare Act (ICWA) through timely initiation of the search process, completing the required ICWA eligibility form (DCF Form 1000), and by notifying the court when required.

2.2.1 The investigation file contained a completed ICWA Eligibility DCF Form 1000.

Requirements: The CPI is required to complete the ICWA Eligibility Form by documenting the family’s response to the inquiry and the family information needed to assist the tribe in determining the child and family’s eligibility for enrollment. The form must be signed by at least one parent to be considered complete.

Instructions and Considerations: The reviewer should assess compliance based on finding a completed ICWA Eligibility DCF Form 1000.

Rating:

✓ Document “9” if the ICWA Eligibility DCF Form 1000 was completed and signed.

✓ Document “0” if the ICWA Eligibility DCF Form 1000 was incomplete, not completed or not signed.

2.2.2 The ICWA checklist was completed if the child reported to be a member of a tribe or was eligible to be a member of a tribe.

Requirements: The CPI is required to complete the activities outlined on the ICWA Checklist to identify the children’s Indian ancestry, complete a diligent search, and notify the tribe. The ICWA Checklist is required when a child was removed or court ordered supervision was pursued.

Instructions and Considerations: The reviewer must find a completed ICWA Checklist when a removal has occurred or court ordered supervision services were pursued and the family claims the child(ren) was of American Indian or Alaskan Native descent.

Rating:

✓ Document “9” if the ICWA Checklist was required and thoroughly completed.

✓ Document “7” or “5” if the ICWA Checklist was required and partially completed.

✓ Document “0” if the ICWA Checklist was required and not completed.

✓ Document NA if the family reported they are not or American Indian or Native Alaskan heritage.
2.2.3 If American Indian or Native Alaskan heritage was claimed, the search process was initiated timely by contacting the designated tribe or Bureau of Indian Affairs.

**Requirements:** The CPI is required to timely initiate the search process by contacting the designated tribe or Bureau of Indian Affairs if American Indian or Alaskan Native descent is claimed and the CPI plans to remove the children or pursue court ordered supervision services.

**Instructions and Considerations:** The reviewer is required to look for evidence (a case note) that the CPI initiated the search process by calling the designated tribe or Bureau of Indian Affairs when the CPI has removed children or plans to pursue court ordered supervision services.

**Rating:**

- Document “9” if the CPI timely initiated the search process by calling the designated tribe or Bureau of Indian Affairs.
- Document “0” if a search process was required and not initiated.
- Document “NA” if no search process was required (that is, the family reported they are not of American Indian or Native Alaskan heritage.).

2.2.4 The court was advised if the child was determined to be a member of a tribe or eligible to be a member.

**Requirements:** The CPI is responsible for notifying the court when a child is removed or court ordered supervision services are being pursued and the child (ren) was determined to be a member of a tribe or tribal eligibility was being pursued.

**Instructions and Considerations:** The reviewer should look for evidence the court was notified when children were removed or court ordered supervision services were pursued and the child (ren) was determined to be a member of a tribe or eligibility for tribal membership was pursued. Evidence may be found in court documents or in a chronological note entry.

**Rating:**

- Document “9” if the investigation record documented the CPI advised the court.
- Document “0” if notification was required and there was no evidence of court notification in the investigation record.
- Document NA if the family reported they are not or American Indian or Native Alaskan heritage.

**Reference:** 65C-28.013(1)-(7), F.A.C.; 65C-30.001(67-69) & (146); 65C-30.002(1) (a) & (1) (e) 4, F.A.C.
Placement Priority

2.3 Once the decision was made to remove the child, placement priority was given to responsible relatives/non-relatives rather than licensed care.

**Requirements:** If a decision is made to remove the child(ren), the CPI is required to explore alternatives to placement in a licensed shelter home or facility, and give placement priority to a parent or other responsible adult relative/non-relative if it is in the child(ren)’s best interest.

*Instructions and Considerations:* The reviewer must assess compliance with this review element by looking for evidence or documentation in the investigative file that indicates CPI’s efforts to identify, contact and interview maternal and paternal relatives, non-custodial parents or non-relatives before placing the child in a licensed shelter or facility. If potential placement with responsible relatives/non-relatives was not immediately available, the reviewer should consider attempts to identify potential caretakers for the entire period of time the CPI was responsible for identifying placement options.

**Rating:**

- ✓ Document “9” if the investigation record contained evidence of the CPI’s inquiries and attempts to explore other responsible adult relative and non-relative caregivers on both the mother’s and father’s side of the family during the removal process and investigation.
- ✓ Document “7” if the investigation record documents some but not all responsible relative and non-relative caregivers were explored during the removal process and investigation.
- ✓ Document “0” if the investigation record documented no efforts to explore other responsible relative and non-relative caregivers.
- ✓ Document NA if removal was completed by the CPI on an open child welfare services case and the decision to place with a relative/non-relative was made by the CBC case manager.

**Reviewer Comments:**

*Reference:* ss. 39.401(1) (b) 3; & 39.401(2) (a) 3; & 39.402(1) (c), F.S.
Background Checks and Home Inspections

2.4 When the CPI placed the child with relatives/non-relatives the investigation file contained evidence of required background checks and a physical inspection of the home prior to the child’s placement.

Note: If removal was completed by the CPI on an open child welfare services case and the decision to place with a relative/non-relative was made by the CBC case manager, the reviewer will answer N/A to this question and subparts a-c. To the extent possible, the CPI should ensure copies of the home study and information related to background checks completed by the CBC case manager, are included in the investigation file.

2.4.1 The required background checks were completed prior to the child’s placement.

1. Prior abuse reports
2. Department of Juvenile Justice (ages 12-26)
3. Local Law Enforcement
4. Florida Department of Law Enforcement (FDLE)
5. NCIC
6. Department of Corrections
7. Child Welfare Out of State (if the record reflects the family resided in another state)
8. 911 calls or calls for service
9. Prior case management records
10. Other (for example, military records as needed)

Requirements: If a placement in a non-licensed setting is being arranged by the CPI, the CPI must complete criminal and abuse history checks on all household members. This includes fully assessing the information the checks provide while making placement decisions.

Instructions and Considerations: To assess compliance with this review element, the reviewer should find the required NCIC check when a placement is made with a relative/non-relative placement or testimony, or evidence exists that a household member(s) has an arrest history in Florida or in another state. (The reviewer should exclude the NCIC requirement when placement is made with a biological/legal parent.) “Other” checks (10) include any prior case management records.

Rating:

✓ Document “9” when the investigation file contains evidence that all required background checks were completed prior to the child’s placement.

✓ Document “7” or “5” when the investigation file contains evidence that some but not all of the required background checks were completed prior to the child’s placement or all of the required background checks were completed but following the child’s placement.
✓ Document “0” when the investigation file contains no evidence the required background checks were completed either before or following the child’s placement.

✓ Document “NA” when a background check was not required

Reviewer Comments:


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2.4.2 **A physical inspection of the home was completed during the home study process prior to the child’s placement.**

**Requirements:** If a placement in a non-licensed setting is being arranged by the CPI, the CPI must complete and document a physical inspection of the home prior to the child’s placement.

**Instructions and Considerations:** The reviewer is required to assess compliance with this review element through finding evidence the physical inspection of the home was completed prior to the child’s placement. The physical inspection of the home is typically documented on the relative caregiver’s home study format.

**Rating:**

✓ Document “9” if the CPI documented a physical inspection of the home and a home study, prior to the placement of the child.

✓ Document “7” or “5” if the CPI completed a physical inspection of the home following the child’s placement in the home or documentation of the physical inspection of the home was minimal.

✓ Document “0” if the investigation record contains no documentation a physical inspection of the home was completed.

✓ Document “NA” if no removal or no placement in an unlicensed placement occurred.

**Reviewer Comments:**

Reference: 39.521(2) (r) 3, F.S.
2.4.3 An evaluation of the prospective caregiver’s capacity to protect was completed prior to the child’s placement.

Requirements: The CPI is required to document an evaluation of the prospective caregiver’s capacity to protect prior to the child’s placement.

Instructions and Considerations: The reviewer is required to assess compliance with this review element based on the CPI’s documented judgment about the prospective caregivers’ suitability. An evaluation of the prospective caregivers’ capacity to protect should at a minimum address the caregivers’ relationship with the parents, the presence or absence of threat to the child (ren)’s safety, and when a potential threat exists, discussion of an appropriate plan for responding to the threat. A check in a box is not sufficient to meet the requirements of this review element.

Rating:

✓ Document “9” if there is evidence of the CPI’s informed judgment of the prospective caregivers’ suitability, and the presence or absence of a threat to the children’s safety was addressed.

✓ Document “0” if there is no evidence of the CPI’s informed judgment of the prospective caregivers’ suitability, or if the presence or absence of a threat to the children’s safety or the issue was addressed with a check in the box on the caregiver’s home study.

✓ Document “NA” if no removal or placement with a relative or non-relative caregiver occurred.

Reviewer Comments:

2.5 Placement of Sibling Groups

If removal involved a sibling group, the siblings were placed together with a relative or non-relative caregiver (not in licensed care) when it was in their best interest.

Requirements: Every effort should be made to place siblings in the same home, and/or to help them keep in contact with one another if separated. If children cannot be placed together, a plan must be developed for frequent visitation.

Note: This review element addresses the extent to which the Department has control over placement. It does not address sibling placements made by the CBC Placement authority.

Instructions and Considerations: The reviewer must consider if siblings are separated due to limited resources or placement disruptions versus separations based on efforts to meet the individual child’s needs. The reviewer is required to determine compliance based on whether the siblings lived together prior to removal or whether the siblings should be placed together, e.g., newborn delivered following the removal of siblings.

Rating:

✓ Document “9” if the CPI placed siblings together when their prior relationship and living arrangement supported this.

✓ Document “9” if the siblings were not separated, support for the sibling bond was appropriately noted, or separation of the siblings was necessary to address the individual needs of the children (safety, therapeutic, relative or non-relative bond).

✓ Document “0” if siblings were separated and the investigation file does not document the separation was necessary to address the individual needs of the children (safety, therapeutic, relative or non-relative caregiver bond).

✓ Document “NA” when there were no siblings placed, and when the CBC Placement authority made the placement in a licensed facility/home beyond the CPI’s control.

Reviewer Comments:

Reference: s. 39.001(1) (k), F.S.; CFSR Permanency Outcome 2, Item 12 – The Continuity of Family Relationships and Connections are Preserved for Children; & CFOP 175-34 (4) (k)
Child Health Check-Up

2.6 If the child was removed and placed in a licensed home or with a relative or non-relative caregiver, a Child Health Check-Up was completed within 72 hours of removal.

Reference: s.39.407, F.S.; 65C-29.008 (1) & 65C-30.001(17) & 65C-30.002(1) (g) 1 & 4, F.A.C

2.6.1 The Child Health Check-Up was completed within 72 hours of the child’s removal and a copy is in the investigation file.

Requirements: Florida law requires every child removed to have a Child Health Check-Up within 72 hours [formerly known as the Early Periodic Screening and Diagnostic Testing (EPSDT)], by a recognized healthcare provider to determine the child’s current condition and healthcare needs. The Child Health Check-Up is required for every child placed in a licensed home or with a relative/non-relative caregiver. Administrative Rule states, “An initial health assessment shall be completed within 72 hours of removal, unless the child is returned to the home from which he/she was removed within 72 hours of removal. Following the ESI staffing, the services worker shall provide or arrange for medical care or health check-up for a child who enters out-of-home care, unless already completed by the CPI per local agreements.”

Instructions and Considerations: The reviewer is required to assess compliance with this review element based on finding a completed Child Health Check-Up within 72 hours of removal by a recognized healthcare provider or the medical discharge summary for a newborn or a medical discharge summary for a child discharged from a medical inpatient unit.

Rating:

✓ Document “9” if the investigation file contains a copy of the completed Child Health Check-Up or medical discharge summary for a newborn or a child discharged from a medical in-patient unit, if completed within 72 hours of removal.

✓ Document “0” if the investigation file does not contain a copy of the completed Child Health Check-Up or the medical discharge summary for a newborn or a child discharged from a medical inpatient unit.

✓ Document NA if the child was returned within 72 hours.

Reviewer Comments:

Reference: s. 39.407, F.S. 39.301(10) (b)
2.6.2 If the Child Health Check-Up was not completed within 72 hours of the child’s removal, the Child Health Check-Up was completed at some point thereafter and a copy was in the investigation file.

**Requirements:** Florida law requires every child removed to have a Child Health Check-Up.

*Instructions and Considerations:* The reviewer is required to assess compliance with this review element by ensuring a Child Health Check-Up is completed for each child removed and placed in out-of-home care. The timeframe should not be considered when evaluating compliance with this review element.

**Rating:**

- Document “9” if the Child Health Check-Up was completed, even if it was not completed timely.
- Document “0” if the investigation file does not contain a copy of the completed Child Health Check-Up or a copy of the medical discharge summary if the investigation involves a newborn or a child discharged from a medical in-patient unit.

**Reviewer Comments:**

*Reference:* Department of Children and Families, Office of Family Safety, Best Practice
Emergency Intake Forms

2.7 The Emergency Intake Form was completed and accurately identified the current medical information and/or needs of the child as known by the parent, guardian or legal custodian.

Requirements: Florida Administrative Code requires the CPI to complete an Emergency Intake Form for each child taken into custody to identify any current medical information and/or needs of the child that are known by the parent, guardian or legal custodian. A copy of the required form is included in 65C, F.A.C.

Instructions and Considerations: The reviewer is required to assess compliance with this review element based on finding a completed Emergency Intake Form in the investigation file. If the form documents the parent, guardian or legal custodian initially refused to provide the information, the investigation file should document the CPI’s request for the court to order the parent, guardian or legal custodian to provide the required information and a completed Emergency Intake Form.

Rating:

✓ Document “9” if the Emergency Intake Form was thoroughly completed.

✓ Document “7” or “5” if the intake form was partially completed based on professional judgment.

✓ Document “0” if a completed Emergency Intake Form was not found in the investigation file.

✓ Document “NA” if the parent, guardian or legal custodian refused to provide the information and the court refused to order the parent, guardian or legal custodian to provide the information.

Reviewer Comments:

Reference: 65C-29.003(6)(a)1.d., F.A.C
Department of Children and Families  
Request for Action Transmittal Form

RA#: _____

Please Check One:

☐ CHILD SAFETY CONCERN
☐ Administrative Concern

RESPONSE DUE: _____________________

Review Date: __________

Quality Assurance Specialist: _____________________

Case Name: ______________________________________

Report Number (when applicable): _____________________

Program: ☐ Child Protective Investigation

CPI Unit: ______________

Circuit: ___________

County: ________________

Related Reference(s):

☐ Statute Cite: ☐ Administrative Rule Cite:
☐ Statewide Operating Procedure: ☐ Agency Operating Procedure:
☐ Funding Requirement: ☐ Best Practice:
☐ Contract Requirement:

Presenting Concern(s):
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________

Recommended Action(s):
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
A written response is due by ____________. Please provide a response and submit the entire form to the Lead Operations Review Specialist identified below.

Submitted by: __________________________
Operations Review Specialist
Agency: ________________
Date: ________________

Reviewed by: __________________________
Lead Operations Review Specialist
Agency: __________________________
Date: ________________

Response to Presenting Concern(s) and Recommended Action(s):

______________________________________________   ______________________
Prepared by: (Name/Title)                                      Date

Approved by: Lead Operations Review Specialist   Date

☐ All presenting Issue(s) and recommendation(s) are resolved.

☐ Follow Up Action Required:
  ☐ Safety Staffing Required.                                      Date/Time Scheduled:
  ☐ Additional Information/Action Needed to Resolve:

Date/Time Submitted: ________/ _______
Lead Operations Review Specialist:
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<tr>
<td>Circuit 5</td>
<td>August 18 - 21</td>
<td>February 9 - 12</td>
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<tr>
<td>Circuit 9</td>
<td>November 3 - 6</td>
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<tr>
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<td>October 6 - 9</td>
<td>April 6 - 9</td>
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<td>Circuit 18</td>
<td>December 3 - 5</td>
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<td>Circuit 19</td>
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